

October 31, 2014

Commissioner Nicholas A. Toumpas
Office of the Commissioner
NH Department of Health & Human Services
129 Pleasant Street
Concord, NH 03301

Re: Draft Premium Assistance Program 1115 Demonstration Waiver Comment

Dear Commissioner Toumpas:

New Futures appreciates the opportunity to comment on the Draft Premium Assistance Program 1115 Demonstration Waiver to be submitted to the Centers for Medicaid Services by the NH Department of Health and Human Services.

New Futures is a nonpartisan, nonprofit organization that advocates, educates and collaborates to prevent and reduce New Hampshire substance abuse problems. New Futures envisions a State and local communities where public policies support prevention, treatments and recovery oriented efforts to reduce alcohol and other drug problems.

For the past decade, New Futures has worked diligently to ensure the citizens of New Hampshire have access to quality behavioral health services. New Futures was thrilled by the recent passage of the New Hampshire Health Protection Plan (NHHPP), which will expand access to substance use treatment to approximately 7,000 New Hampshire residents.

With the passage of the NHHPP, the NH Department of Health and Human Services (the Department) was tasked with creating a service array for the new Substance Use Disorder (SUD) benefit. The Department recommended a comprehensive and robust SUD service array, which will ensure the residents of NH have access to high quality SUD care and treatment.

Given the particular vulnerability of New Hampshire's SUD populations, the proposed Premium Assistance Program 1115 Demonstration Waiver contains some provisions which are cause for concern and threaten access to needed SUD services. With that in mind, we offer the following comments.

Cost-Sharing Payments

The primary goal of Senate Bill 413, which established the NHHPP, was to increase access to health care coverage for low-income New Hampshire residents and to encourage individuals to take personal responsibility for their health care. The type of personal responsibility SB 413 sought to encourage was more than an individual's ability to pay co-pays; it was managing chronic conditions, going to doctors' appointments, filling necessary prescriptions and seeking care when sick or injured.

While cost-sharing requirements may force an individual to financially contribute to their health care costs, it does not encourage “personal responsibility” as the NHHPP intended. Numerous studies have shown that low-income individuals are extremely sensitive to even modest increases in costs of health care. The implementation of cost-sharing deters low-income individuals from accessing needed medical care, resulting in increased emergency room visits for conditions which could have been effectively managed through a timely visit with a primary care provider.

Individuals with SUD and co-occurring mental illness are particularly sensitive to cost-sharing requirements due to the chronic nature of their conditions. Numerous individuals with SUD rely on medication assisted treatments such as methadone or suboxone to manage their disease. Requiring co-pays for such routine visits and prescription administration may threaten the recovery of some NHHPP beneficiaries who find the co-pays excessively burdensome.

Given conflict between cost-sharing and the intent of SB 413, New Futures strongly recommends the Department eliminate the cost-sharing requirement present in the Draft Premium Assistance Program 1115 Demonstration Waiver. At the very least, New Futures encourages the Department to consider lowering the percent of cost-sharing required of this population and to create an exemption from the cost-sharing requirements for drugs designed to manage chronic conditions.

Collection of Payments & Tracking

Related to the issue of cost-sharing is the proposed method for tracking beneficiary contributions. Federal law caps cost-sharing for NHHPP beneficiaries at 5% of an individual’s annual household income. It is the responsibility of the State to ensure beneficiaries are not billed in excess of this cap. The Draft Premium Assistance Program 1115 Demonstration Waiver proposes to track NHHPP beneficiaries’ out-of-pocket expenditures on a quarterly basis.

Tracking expenditures in this manner is concerning. Individuals facing expensive procedures in the first month of a given quarter could be required to pay up to, or beyond, 15% of their monthly household income in the first month alone. If a beneficiary continues to incur health care expenses for the remainder of the quarter, and his or her expenditures are not reviewed in a timely manner, the beneficiary may be required to pay an even greater amount.

While refunding beneficiaries for overpayments made within a given quarter is a start, it does not address the real hardship this method of tracking may place on low-income individuals. As stated above, low income individuals are particularly sensitive to any increased costs associated with health care. Tracking expenditures on a quarterly basis may deter individuals from accessing health care or force them to make the difficult decision between paying for basic needs and receiving medical care.

New Futures strongly recommends the Department consider reviewing out-of-pocket expenditures on a monthly basis, to reduce the potential for hardship on low-income NHHPP beneficiaries.

Waiver of Medicaid’s 3 Month Retroactive Coverage Period

Another area of concern for SUD populations is the proposed waiver of Medicaid’s three month retroactive coverage period for NHHPP beneficiaries. The proposed waiver would limit retroactive coverage to the date an application was submitted to the Department. The Department reasoned that waiving this part of Medicaid law would only affect the small number of people

who failed to sign up for coverage under the “Bridge” program because they were “difficult to reach or engage.”

Traditionally, individuals with SUD or co-occurring mental illnesses are “difficult to reach or engage.” These individuals may not have a permanent address or access to technology. SUD and Mental Health providers are actively working to encourage their patient populations to enroll in NHHPP, but it is a struggle. Providers have reported having multiple contacts with clients before they are able to collect sufficient information to complete an NHHPP application.

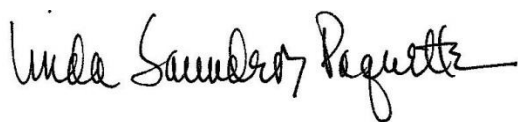
As a result, New Hampshire SUD and Mental Health providers are heavily reliant on the three month retroactive coverage period to obtain payment for services rendered to the State’s SUD and mentally ill populations. Waiving this essential feature of Medicaid would threaten the continued viability of New Hampshire’s SUD and Mental Health treatment providers and limit the ability of NHHPP eligible individuals to obtain needed care. New Futures therefore strongly encourages the Department to reconsider this aspect of the Draft Premium Assistance Program 1115 Demonstration Waiver.

Grievance & Appeals

As a final note, New Futures echoes the sentiments of other advocates around the proposed grievance and appeals procedures for NHHPP beneficiaries in private Marketplace health plans. The insurance grievance and appeals process is difficult to navigate for even the most sophisticated health care consumers. NHHPP beneficiaries are particularly vulnerable to becoming lost in the complex insurance appeals system, threatening their rights as Medicaid recipients. New Futures strongly recommends the creation of an ombudsman’s office to help NHHPP beneficiaries navigate the insurance appeals process and to ensure their rights under Medicaid are protected.

Thank you for the opportunity to submit these comments. New Futures looks forward to working together with the Department to ensure the successful implementation of the New Hampshire Health Protection Plan and its associated programs.

Sincerely,

A handwritten signature in black ink that reads "Linda Saunders Paquette". The signature is fluid and cursive, with the first name "Linda" being the most prominent.

Linda Saunders Paquette, Esq.
Executive Director
New Futures

A handwritten signature in black ink that reads "Michele D. Merritt". The signature is cursive and elegant, with the first name "Michele" being the most prominent.

Michele D. Merritt, Esq.
Policy Director
New Futures